TRANSMITTAL FORM Filing Date Signature of Pages in This Submission 12 Application Number 09/809,405 Application Number 09/809,405 Filing Date 03/15/2001 Frank Rademacher Art Unit 2621 Examiner Name Behrooz Senfi Attorney Docket Number 5327 - 010251

Total Number of Lages	III Tilla Suoliliaaloi	1 12	Attorney Doc	ket Nutitber	3327-0	10251						
ENCLOSURES (check all that apply)												
After Allougues communication												
Fee Transmittal I	Form		Drawing(s)			to TC						
Fee Attach	ed		Licensing-related	l Papers		Appeal Communication to Board of Appeals and Interferences						
Amendment / Reply			Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final	1		Petition to conve Provisional Appl			Proprietary Information						
Affidavits/	declaration(s)		Power of Attorne Change of Corre Address			Status Letter						
Extension of Tim	Extension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please identify below):						
Express Abandonment Request						est for Continued Examination 3) Transmittal						
Information Disclosure Statement			CD, Number of 0	,								
			Landscape 1	Table on CD								
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts Under 37 CFR 1.52 or 1.53		Ren	narks									
The Commissioner for Patents is hereby authorized to charge any additional fees or underpayment of fees under 37 CFR 1.16 and 1.17 to Deposit Account No23-0650												
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT												
Firm Name	Firm Name The Webb Law Firm											
Signature Somm												
Printed Name	Printed Name Lester N. Fortney											
Date July 2, 2008			TO THE RESIDENCE OF THE PARTY O	Reg. No.	38,141							
CERTIFICATE OF TRANSMISSION / MAILING												
I hereby certify that this correspondence is being electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:												
Signature Jennifer Hallin												
Typed or printed name Jennifer L. Halkias					Date	July 2, 2008						

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known											
FEE TRANSMITTAL				Application Number 09/80			809,405							
				Filing I	Filing Date		01							
For FY 2008				First N	First Named Inventor Frank R			ademacher						
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name Behro			hrooz Senfi							
			Art Unit 2621 Attorney Docket 5327 - 0											
TOTAL AMOUNT OF PAYMENT (\$) 930.00			Attorne	y Docket										
METHOD OF PAYMENT (check all that apply)														
Check V Cr	Check Credit Card Money Order Other (please identify):													
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: Deposit Account N														
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee														
Charge any additional fee(s) or underpayments of fee(s)														
under 37 CFR 1.16 and 1.17														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)														
1. BASIC FILING, SEARCH, AND EXAMINATION FEES														
	FILING		SEARCH	FEES		TION FEES	3							
Amuliantian Trus	-	nall Entity	***************************************	ll Entity	_	Small Entity			. 1. (5)					
Application Type				<u>ee (\$)</u>	Fee (\$)	Fee (\$)		Fees P	aid (S)					
Utility	310	75		255	210	105			***************************************					
Design	210	105	100	50	130	65		•						
Plant	210	105	310	155	160	80								
Reissue	310	155	510	255	620	310		N						
Provisional	210	105	0	0	0	0								
2. EXCESS CLAIM	FEES								Small Entity					
Fee Description								Fee (\$)	<u>Fee (\$)</u>					
Each claim over 20 (in	-	•						50	25					
Each independent claim	•	iding Reissues)						210	105					
Multiple dependent cla	anns 20 or HP	Evtra Claim	Too (P)	Trac Track (ft)		78.7	370	185					
Total Claims -	<u> </u>	Extra Claim	s Fee (S	= 57	Fee Paid (\$)		<u>1V.</u>	<u>иниріе De</u> <u>Fee (\$)</u>	pendent Claims Fee Paid (\$)					
HP = highest number of	total claims paid	for, if greater than						rector	reer aid (5)					
Indep. Claims -	<u>3 or HP</u>	Extra Claim	-		Fee Paid (\$)									
HP = highest number of			xter than 3.											
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)														
- 100)=	/ 50 =		(round u	ip to a whole nun	nber)	х	=						
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)														
Other (e.g., late filing surcharge): RCE (\$810) and one-month Extension of Time (\$120) \$930.00														
SUBMITTED BY		>		η	istration NT-									
Signature	ignature Registration No. (Attorney/Agent) 38141 Telephone 412-471-8815								71-8815					
Name (Print/Type)	>			Date	July	2, 2008								